



<b>UNCLASSIFIED    <del>RESTRICTED</del>    CONFIDENTIAL    <u>SECRET</u></b> (SENDER WILL CIRCLE CLASSIFICATION TOP AND BOTTOM)															
<b>CENTRAL INTELLIGENCE AGENCY OFFICIAL ROUTING SLIP</b>															
<b>TO</b>		<b>INITIALS</b>	<b>DATE</b>												
1	General Counsel														
2															
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<b>FROM</b>		<b>INITIALS</b>	<b>DATE</b>												
1	DD/P	AWD	28 Jan												
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<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> APPROVAL</td> <td><input type="checkbox"/> INFORMATION</td> <td><input type="checkbox"/> SIGNATURE</td> </tr> <tr> <td><input type="checkbox"/> ACTION</td> <td><input type="checkbox"/> DIRECT REPLY</td> <td><input type="checkbox"/> RETURN</td> </tr> <tr> <td><input type="checkbox"/> COMMENT</td> <td><input type="checkbox"/> PREPARATION OF REPLY</td> <td><input type="checkbox"/> DISPATCH</td> </tr> <tr> <td><input type="checkbox"/> CONCURRENCE</td> <td><input type="checkbox"/> RECOMMENDATION</td> <td><input type="checkbox"/> FILE</td> </tr> </table> <p style="margin-top: 10px;"> <b>REMARKS:</b> The attached memorandum adequately sets forth the discussion of the meeting of the other day, and I return for such further distribution as you may wish to make. At         <div style="border: 1px solid black; width: 100px; height: 50px; display: inline-block; vertical-align: middle; margin-left: 10px;"></div> </p> <div style="margin-top: 20px; text-align: center;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>TOP</b> SECRET         </div> <div style="margin-left: 20px;">           CONFIDENTIAL    RESTRICTED    UNCLASSIFIED         </div> </div>				<input type="checkbox"/> APPROVAL	<input type="checkbox"/> INFORMATION	<input type="checkbox"/> SIGNATURE	<input type="checkbox"/> ACTION	<input type="checkbox"/> DIRECT REPLY	<input type="checkbox"/> RETURN	<input type="checkbox"/> COMMENT	<input type="checkbox"/> PREPARATION OF REPLY	<input type="checkbox"/> DISPATCH	<input type="checkbox"/> CONCURRENCE	<input type="checkbox"/> RECOMMENDATION	<input type="checkbox"/> FILE
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FORM NO. 30-4  
SEP 1947

25X1A

**DOCUMENT DESCRIPTION**

## REGISTRY

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